

510(K) SUMMARY OF SAFETY AND EFFECTIVENESS For STERILE LATEX WITH NITRILE COATING POWDER-FREE BLUE SURGICAL GLOVES WITH NEU-THERA COATING

(A summary of safety and effectiveness information in accordance with the requirements of 21 CFR 807.92)

Applicant:

Cardinal Health

1430 Waukegan Road McGaw Park, IL 60085

Establishment Registration

Number:

1423537

Regulatory Affairs

Contact:

Tatyana Bogdan, RAC

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Summary Prepared: June 14, 2011

Trade Name:

ProtexisTM Latex Blue with Neu-Thera® Surgical Gloves

Common Name:

Surgeon's Gloves

Classification Name: Surgeon's Gloves

Regulation:

Classification Panel: General and Plastic Surgery

Product Code(s):

21 CFR 878.4460

KGO

Legally marketed device(s)

to which equivalence Protegrity® Blue Sterile Powder-Free Latex/Nitrile Surgical Gloves with

is claimed:

Neu-Thera Coating and with Protein Content Label Claim of 50

micrograms or less (510(k) K053272, product code KGO)

Reason for 510(k)

Submission:

Modification of a legally marketed device

Device Description: The proposed device is a disposable device intended for over the counter use and is provided powder-free sterile. It is made with natural rubber latex. The glove is coated with nitrile coating. The glove is manufactured using exact same material used in the currently cleared device, Protegrity Blue glove (K053272). The glove is coated with emollient coating (containing Glycerol, Gluconolactone, D-Sorbitol and Provitamin-B). The glove is manufactured using molds that feature anti-slip finish, independent thumb, and tapered mechanically locking cuffs to help reduce cuff roll down.

Intended Use:

This powder-free surgeon's glove is a disposable device made of natural rubber intended to be worn by operating room personnel to protect a surgical wound from contamination.

Summary of the tec	hnological characteristics of	he dev	ice compared to the predicate device	
	Modified Device		Original (Predicate)	
	Sterile Latex with Nitrile Co	ating	Protegrity Blue Sterile Latex/Nitrile	
Characteristic	Powder-Free Blue Surgical G	_	Powder-Free Surgical Glove with	
	with Neu-Thera Coating		Neu-Thera Coating (K053272)	
Material	Natural Rubber Latex coated		Natural Rubber Latex coated with	
Composition	Nitrile		Nitrile	
Design	Single Use		Single Use	
	Sterile		Sterile	
	Powder-free		Powder-free	
	Hand Specific		Hand Specific	
	Independent Thumb		Independent Thumb	
	Beaded Cuff		Beaded Cuff	
	Lubricated		Lubricated	
Coating	Provitamin B, Gluconolactor	ie, D-	Chitosan, Provitamin B,	
Contents	Sorbitol and Glycerol		Gluconolactone, D-Sorbitol and	
		_	Glycerol	
Intended Use/	Powder-Free Surgeon's Glove		Powder-Free Surgeon's Glove	
Indications for Use				
Dimensions &	Meets ASTM D3577		Meets ASTM D3577	
Physical Properties	<u> </u>			
Freedom from	AQL meets 21CFR 800.20) &	AQL meets 21CFR 800.20 & ASTM	
Holes	ASTM D3577 requirement	nts	D3577 requirements	
Powder Residual	Meets requirements of ≤2	2.0	Meets requirements of ≤2.0 mg/glove	
10,,401,100,444	mg/glove for Powder-Fre		for Powder-Free designation per	
	designation per ASTM D3		ASTM D3577	
Protein Contents	Contains less than 50 µg/dn		Contains less than 50 µg/dm ² of total	
1 Totem Contents	total water extractable protein		water extractable protein per glove as	
	glove as tested per ASTM D		tested per ASTM D5712	
	PERFORMAN		<u> </u>	
SUMMARY OF NO			ED FOR DETERMINATION OF	
SUBSTANTIAL E				
Performance Test S	Summary-New Device			
Characteristic	Standard/Test/FDA	Results Summary		
	Guidance			
Biocompatibility:				
Primary Skin Irritation		Gloves are non-irritating.		
Guinea Pig	ISO 10993-10	Gloves do not display any potential for		

Maximization		sensitization.
Physical		
Characteristics:		
Dimensions	ASTM D3577	Meet requirements
Physical Properties	ASTM D3577	Meet requirements for rubber surgical gloves
Freedom from Holes	21 CFR 800.20 &	Tested in accordance with ASTM D5151
	ASTM D3577	with acceptable results
Powder Residual	ASTM D3577 tested	Gloves meet powder level requirements for
	using ASTM standard	"Powder-Free" designation per ASTM
	D6124	D3577. Results generated values < 2mg of
		residual powder per glove.
Protein Content	ASTM D5712, FDA	Gloves yielded the results of less than 50
A A D D WALL WOULD WALL	Medical Glove	μg/dm ² of total water extractable protein per
	Guidance Manual	glove

| Comparative Performance Information Summary

Characteristic	Requirement	New Device	Predicate Device
Biocompatibility:	ISO 10993-1	Meets requirements	Meets requirements
Primary Skin Irritation	ISO 10993-10	Pass	Pass
Guinea Pig Maximization	ISO 10993-10	Pass	Pass
Dimensions	ASTM D3577	Meets requirements	Meets requirements
Physical Properties	ASTM D3577	Meets requirements	Meets requirements
Freedom from Holes	21CFR800.20, ASTM D3577	Meets requirements	Meets requirements
Powder Residual	ASTM D3577	Meets requirements	Meets requirements
Protein Content	ASTM D5712	Pass	Pass

SUMMARY OF CLINICAL TESTS CONDUCTED FOR DETERMINATION OF SUBSTANTIAL EQUIVALENCE AND/OR OF CLINICAL INFORMATION

Clinical data is not required.

CONCLUSIONS DRAWN FROM NON-CLINICAL AND CLINICAL DATA

Non-clinical data demonstrates that Sterile Latex with Nitrile Coating Powder-Free Blue Surgical Gloves with Neu-Thera Coating and with Protein Content Label Claim (50 micrograms or less) meet the technological characteristics of ASTM D3577 standard, and are as safe, as effective, and performed as well as the legally marketed devices identified in this summary.



Food and Drug Administration 10903 New Hampshire Avenue Document Control Room -WO66-G609 Silver Spring, MID 20993-0002

Tatyana Bogdan Regulatory Affairs Manager Cardinal Health, Incorporated 1430 Waukegan Road Megaw Park, Illinois 60085

SEP 2 9 2011

Re: K111878

Trade/Device Name: ProtexisTM Latex Powder-Free Blue Surgical Gloves with Neu-Thera[®] Coating with Protein Content Labeling Claim of 50 Micrograms, or less

Regulation Number: 21 CFR 878.4460 Regulation Name: Surgeon's Gloves

Regulatory Class: [Product Code: KGO Dated: August 02, 2011 Received: August 8, 2011

Dear Ms. Bogdan:

We have reviewed your Section 510(k) premarket notification of intent to market the device referenced above and have determined the device is substantially equivalent (for the indications for use stated in the enclosure) to legally marketed predicate devices marketed in interstate commerce prior to May 28, 1976, the enactment date of the Medical Device Amendments, or to devices that have been reclassified in accordance with the provisions of the Federal Food, Drug, and Cosmetic Act (Act) that do not require approval of a premarket approval application (PMA). You may, therefore, market the device, subject to the general controls provisions of the Act. The general controls provisions of the Act include requirements for annual registration, listing of devices, good manufacturing practice, labeling, and prohibitions against misbranding and adulteration. Please note: CDRH does not evaluate information related to contract liability warranties. We remind you, however, that device labeling must be truthful and not misleading.

If your device is classified (see above) into either class II (Special Controls) or class III (PMA), it may be subject to additional controls. Existing major regulations affecting your device can be found in the Code of Federal Regulations, Title 21, Parts 800 to 898. In addition, FDA may publish further announcements concerning your device in the <u>Federal Register</u>.

Please be advised that FDA's issuance of a substantial equivalence determination does not mean that FDA has made a determination that your device complies with other requirements of the Act or any Federal statutes and regulations administered by other Federal agencies. You must comply with all the Act's requirements, including, but not limited to: registration and listing (21 CFR Part 807); labeling (21 CFR Part 801); medical device reporting (reporting of medical device-related adverse events) (21 CFR 803); good manufacturing practice requirements as set forth in the quality systems (QS) regulation (21 CFR Part 820); and if applicable, the electronic product radiation control provisions (Sections 531-542 of the Act); 21 CFR 1000-1050.

If you desire specific advice for your device on our labeling regulation (21 CFR Part 801), please go to http://www.fda.gov/AboutFDA/CentersOffices/CDRH/CDRHOffices/ucm 115809.htm for the Center for Devices and Radiological Health's (CDRH's) Office of Compliance. Also, please note the regulation entitled, "Misbranding by reference to premarket notification" (21CFR Part 807.97). For questions regarding the reporting of adverse events under the MDR regulation (21 CFR Part 803), please go to http://www.fda.gov/MedicalDevices/Safety/ReportaProblem/default.htm for the CDRH's Office of Surveillance and Biometrics/Division of Postmarket Surveillance.

You may obtain other general information on your responsibilities under the Act from the Division of Small Manufacturers, International and Consumer Assistance at its toll-free number (800) 638-2041 or (301) 796-7100 or at its Internet address http://www.fda.gov/MedicalDevices/ResourcesforYou/Industry/default.htm.

Sincerely yours,

Anthony D. Watson, B.S., M.S., M.B.A.

In for

Director

Division of Anesthesiology, General Hospital, Infection Control and Dental Devices

Office of Device Evaluation

Center for Devices and Radiological Health

Enclosure



Indications for Use

510(k) Number (if kn	own): <u>K111878</u>
Device Name:	Protexis TM Latex Powder-Free Blue Surgical Gloves with Neu-Thera® Coating with Protein Content Labeling Claim of 50 micrograms, or less
Device description:	Sterile Latex with Nitrile Coating Powder-Free Blue Surgical Gloves with Neu-Thera Coating (containing Glycerol, Gluconolactone, D-Sorbitol and Provitamin-B) and with Protein Content Labeling Claim 50 micrograms, or less.
Indications for Use:	This powder-free surgeon's glove is a disposable device made of natural rubber intended to be worn by operating room personnel to protect a surgical wound from contamination.
Prescription Use (Part 21 CFR 80	
(PLEASE DO NO	T WRITE BELOW THIS LINE-CONTINUE ON ANOTHER PAGE OF NEEDED)
Со	ncurrence of CDRH, Office of Device Evaluation (ODE)
	Elight I. Claume-Will
•	(Division Sign-Off) Division of Anesthesiology, General Hospital Infection Control, Dental Devices
	510(k) Number: K 111878